

ISSUE SLIP STATE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
	<i>mf</i>		<i>04/26/01</i>
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		<i>21</i>	<i>5/15/01</i>
FORMALITY REVIEW	<i>FM</i>	<i>72864</i>	<i>6/15/01</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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*251*  
*06/16/01*